

ATTACHMENT 3

Lenses available under the Wisconsin Medicaid State Purchase Eyeglass Contract

The following tables list the types of lenses Medicaid vision providers may order from the Wisconsin Medicaid State Purchase Eyeglass Contract (SPEC) provider beginning on April 1, 2004. Medicaid vision providers should refer to the Healthcare Common Procedure Coding System (HCPCS) Level II national code book for any necessary procedure codes.

Single vision lenses available under the SPEC
Sphere, single vision, plano to plus or minus 4.00, per lens
Sphere, single vision, plus or minus 4.12 to plus or minus 7.00d, per lens
Sphere, single vision, plus or minus 7.12 to plus or minus 20.00d, per lens
Spherocylinder, single vision, plano to plus or minus 4.00d sphere, 0.12 to 2.00d cylinder, per lens
Spherocylinder, single vision, plano to plus or minus 4.00d sphere, 2.12 to 4.00d cylinder, per lens
Spherocylinder, single vision, plano to plus or minus 4.00d sphere, 4.25 to 6.00d cylinder, per lens
Spherocylinder, single vision, plano to plus or minus 4.00d sphere, over 6.00d cylinder, per lens
Spherocylinder, single vision, plus or minus 4.25 to plus or minus 7.00 sphere, 0.12 to 2.00d cylinder, per lens
Spherocylinder, single vision, plus or minus 4.25d to plus or minus 7.00d sphere, 2.12 to 4.00d cylinder, per lens
Spherocylinder, single vision, plus or minus 4.25 to plus or minus 7.00d sphere, 4.25 to 6.00d cylinder, per lens
Spherocylinder, single vision, plus or minus 4.25 to 7.00d sphere, over 6.00d cylinder, per lens
Spherocylinder, single vision, plus or minus 7.25 to plus or minus 12.00d sphere, 0.25 to 2.25d cylinder, per lens
Spherocylinder, single vision, plus or minus 7.25 to plus or minus 12.00d sphere, 2.25d to 4.00d cylinder, per lens
Spherocylinder, single vision, plus or minus 7.25 to plus or minus 12.00d sphere, 4.25 to 6.00d cylinder, per lens
Spherocylinder, single vision, sphere over plus or minus 12.00d, per lens
Lenticular (myodisc), per lens, single vision
Lenticular lens, per lens, single

Multifocal lenses available under the SPEC
Sphere, bifocal, plano to plus or minus 4.00d per lens
Sphere, bifocal, plus or minus 4.12 to plus or minus 7.00d, per lens
Sphere, bifocal, plus or minus 7.12 to plus or minus 20.00d, per lens
Spherocylinder, bifocal, plano to plus or minus 4.00d sphere, 0.12 to 2.00d cylinder, per lens
Spherocylinder, bifocal, plano to plus or minus 4.00d sphere, 2.12 to 4.00d cylinder, per lens
Spherocylinder, bifocal, plano to plus or minus 4.00d sphere, 4.25 to 6.00d cylinder, per lens
Spherocylinder, bifocal, plano to plus or minus 4.00d sphere, over 6.00d cylinder, per lens
Spherocylinder, bifocal, plus or minus 4.25 to plus or minus 7.00d sphere, 0.12 to 2.00d cylinder, per lens
Spherocylinder, bifocal, plus or minus 4.25 to plus or minus 7.00d sphere, 2.12 to 4.00d cylinder, per lens
Spherocylinder, bifocal, plus or minus 4.25 to plus or minus 7.00d sphere, 4.25 to 6.00d cylinder, per lens
Spherocylinder, bifocal, plus or minus 4.25 to plus or minus 7.00d sphere, over 6.00d cylinder, per lens
Spherocylinder, bifocal, plus or minus 7.25 to plus or minus 12.00d sphere, 0.25 to 2.25d cylinder, per lens
Spherocylinder, bifocal, plus or minus 7.25 to plus or minus 12.00d sphere, 2.25 to 4.00d cylinder, per lens
Spherocylinder, bifocal, plus or minus 7.25 to plus or minus 12.00d sphere, 4.25 to 6.00d cylinder, per lens
Spherocylinder, bifocal, sphere over plus or minus 12.00d, per lens
Lenticular (myodisc), per lens, bifocal
Bifocal seg width over 28mm
Lenticular lens, per lens, bifocal
Sphere, trifocal, plano to plus or minus 4.00d, per lens
Sphere, trifocal, plus or minus 4.12 to plus or minus 7.00d per lens
Sphere, trifocal, plus or minus 7.12 to plus or minus 20.00, per lens
Spherocylinder, trifocal, plano to plus or minus 4.00d sphere, 0.12 to 2.00d cylinder, per lens
Spherocylinder, trifocal, plano to plus or minus 4.00d sphere, 2.25 to 4.00d cylinder, per lens
Spherocylinder, trifocal, plano to plus or minus 4.00d sphere, 4.25 to 6.00 cylinder, per lens
Spherocylinder, trifocal, plano to plus or minus 4.00d sphere, over 6.00d cylinder, per lens
Spherocylinder, trifocal, plus or minus 4.25 to plus or minus 7.00d sphere, 0.12 to 2.00d cylinder, per lens
Spherocylinder, trifocal, plus or minus 4.25 to plus or minus 7.00d sphere, 2.12 to 4.00d cylinder, per lens
Spherocylinder, trifocal, plus or minus 4.25 to plus or minus 7.00d sphere, 4.25 to 6.00d cylinder, per lens
Spherocylinder, trifocal, plus or minus 4.25 to plus or minus 7.00d sphere, over 6.00d cylinder, per lens
Spherocylinder, trifocal, plus or minus 7.25 to plus or minus 12.00d sphere, 0.25 to 2.25d cylinder, per lens
Spherocylinder, trifocal, plus or minus 7.25 to plus or minus 12.00d sphere, 2.25 to 4.00d cylinder, per lens
Spherocylinder, trifocal, plus or minus 7.25 to plus or minus 12.00d sphere, 4.25 to 6.00d cylinder, per lens
Spherocylinder, trifocal, sphere over plus or minus 12.00d, per lens
Lenticular (myodisc), per lens, trifocal
Trifocal seg width over 28mm

Miscellaneous lenses available under the SPEC	
Variable asphericity lens, single vision, full field, glass or plastic, per lens	
Variable asphericity lens, bifocal, full field, glass or plastic, per lens	
Balance lens, per lens	
Slab off prism, glass or plastic, per lens	
Prism, per lens	
Special base curve, glass or plastic, per lens	

Medicaid vision providers *are required to obtain prior authorization (PA)* from Wisconsin Medicaid before placing an order with the SPEC for any of the lenses in the following table.

Lenses and services available only with PA from Wisconsin Medicaid		
Procedure code	Modifier	Description
V2744	SC ¹	Tint, photochromatic, per lens
V2745	SC	Addition to lens, tint, any color, solid, gradient or equal, excludes photochromatic, any lens material, per lens
V2755	SC	U-V lens, per lens
V2780	SC	Oversize lens, per lens
V2782	SC	Lens, index 1.54 to 1.65 plastic or 1.60 to 1.79 glass, excludes polycarbonate, per lens
V2783	SC	Lens, index greater than or equal to 1.66 plastic or greater than or equal to 1.80 glass, excludes polycarbonate, per lens
V2784 ²	SC	Lens, polycarbonate or equal, any index, per lens
HCPSC procedure code for listed single vision lens	U1	Transitions lens, single vision
HCPSC procedure code for listed multifocal lens	U2	Transitions lens, multifocal

¹ SC = Medically necessary service or supply.

² Requires PA for recipients ages 21 and over.